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LUMEN INTELLECTUAL PROPERTY SERVICES, INC  
2345 YALE STREET,  
2<sup>ND</sup> FLOOR  
PALO ALTO, CA 94306

Mail Date: 10/25/07  
Application Number: 09/487962

NOTICE TO PAY BALANCE OF ISSUE FEE

The issue fee payment filed on 10/05/07 has been received. Although the fee paid in the Notice of Allowance was paid, new patent fees went into effect on September 30, 2007 after the mailing date of the Notice. See the Sections 801 and 803 of the Consolidated Appropriations Act, 2005 (H.R. 4818). As stated in Section 803 of the Act, "the provisions of this title shall take effect on the date of enactment of this Act. . . the provisions of section 801 shall apply to all patents, whenever granted, and to all patent applications pending on or filed after the effective date [September 30, 2007]. Because the issue fee was paid on or after September 30, 2007, the new issue fee was due instead of the amount specified in the Notice of Allowance.<sup>1</sup>

In accordance with 37 CFR 1.18, applicant is given a time period of **THREE (3) MONTHS** from the mailing date of this notice during which to pay the **BALANCE DUE** indicated below. The balance due is the difference between the issue fee required on the date that the correct issue fee is paid and the amount that was previously paid. This three-month time period may not be extended. If the balance due is not paid before the expiration of the three-month period, the application will become abandoned (if not issued) or the patent will lapse (if issued) at the termination of the three-month period.

App. Type	Column A Issue Fee Req. large entity / small entity	Column B Issue Fee PAID	Balance Due. Col. A minus Col. B
UTILITY or REISSUE	\$1,440.00 / \$720.00	\$ 700.00	\$ 20.00
DESIGN	\$820.00 / \$410.00	\$	\$
PLANT	\$1,130.00 / \$565.00	\$	\$

Krystal Paige  
Office: 703-308-9250 x139  
Fax: 571-270-9937

A copy of this notice MUST be returned with payment.

CERTIFICATE OF MAILING

I hereby certify that this notice and the required additional fee are being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.

Printed Name: Chingail Capital Inc

Signature: [Handwritten Signature]

Registration Number, if any

Date: 11-2-07

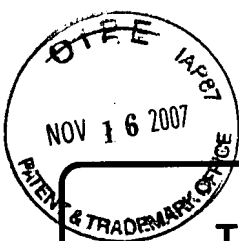
Adjustment date: 11/19/2007 NNGUYEN2  
10/10/2007 FHEK12 00000011 09487962  
01 FC:1506 -700.00 OP

11/19/2007 NNGUYEN2 00000020 09487962

01 FC:2501

720.00 OP

<sup>1</sup> Applicants should check the current fee schedule posted on the USPTO Internet web site at:

**TRANSMITTAL  
FORM***(to be used for all correspondence after initial filing)*

<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/487962
	Filing Date	1/18/2000
	First Named Inventor	Dimitri Speck
	Art Unit	3628
	Examiner Name	Nguyen, Nga
Total Number of Pages in This Submission	Attorney Docket Number	DSK-101/US

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawings	<input type="checkbox"/> After Allowance Comm. to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related papers	<input type="checkbox"/> Appeal Comm. to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Comm. to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/Declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Corresp. Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other (Specified below)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Doc(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	Other: Response to Notice to Pay Balance of Issue Fee	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

FIRM NAME	LUMEN INTELLECTUAL PROPERTY SERVICES, Inc.		
SIGNATURE			
PRINTED NAME	Ron Jacobs		
DATE	11/8/07	REGISTRATION NUMBER	50,142

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below:

SIGNATURE	
PRINTED NAME	Abigail Capulong
DATE	11/8/07

This collection of information is required by 37 CFR 1.51. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 USC 122 and 37 CFR 1.11 and 1.14.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



<b>FEE TRANSMITTAL for FY 2007</b>		Application Number	09/487962
		Filing Date	1/18/2000
		First Named Inventor	Dimitri Speck
		Art Unit	3628
<input type="checkbox"/> Applicant claims small entity status. See CFR 1.27.		Examiner Name	Nguyen, Nga
TOTAL AMOUNT OF PAYMENT	\$20	Attorney Docket Number	DSK-101/US

<b>METHOD OF PAYMENT (Check all that apply)</b>							
<input type="checkbox"/> A check or money order is enclosed to cover the filing fees.							
<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.							
<b>FEE CALCULATION</b>							
<b>1. Basic Filing, Search and Examination Fees</b>							
	Filing Fees		Search Fees		Examination Fees		Fees Paid (\$)
Application Type:	Fee(\$)	Fee(\$) <i>Small Entity</i>	Fee(\$)	Fee(\$) <i>Small Entity</i>	Fee(\$)	Fee(\$) <i>Small Entity</i>	
Utility	310	155	510	255	210	105	\$0
Design	210	105	100	50	130	65	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	
<b>2. Excess Claims Fees</b>							
2.1 Each claim over 20 or for reissues, each claim over 20 and more than in the original patent \$50 (\$25 small entity)							
2.2 Each independent claim over 3, or for reissues, each independent claim more than in the original patent \$200 (\$100 small entity)							
2.3 Multiple dependent claims \$360 (\$180 small entity)							
Total Claims	Threshold		Extra Claims	Fee (\$)			
23	- 23	=	0	X \$50 (\$25)			\$0
Indep. Claims	Threshold		Extra Claims	Fee (\$)			
3	- 3	=	0	X \$210 (\$105)			\$0
Multiple Dep. Claims				Fee (\$)			
<input type="checkbox"/>				\$370 (\$185)			
<b>3. Application Size Fee</b>							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof (round up to whole number). See USC 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets		Fee (\$)				
	- 100 =	/50 =	X \$260 (\$130)				\$0
<b>4. Other Fee(s)</b>							
Non-English specification (\$130 fee, no small entity discount)							
Other: Pay Remaining Balance on Issue Fee							20.00

SIGNATURE <u>Ron Jacobs</u>			
PRINTED NAME	Ron Jacobs	TELEPHONE	650-424-0100
DATE	11/8/07	REGISTRATION NUMBER	50,142